

**AMBULANCE RUN REPORT  
INSTRUCTIONS AND INFORMATION**

Patient information is confidential under Wisconsin State Statute 146.82. All Emergency Medical Service staff is held accountable to this law. The Ambulance Run Report is primarily used to record prehospital patient care and interfacility patient transport care. Emergency Medical Technicians (EMTs) are required to complete care information and leave a copy with the receiving facility, hospital, clinic, etc. This provides for continuity of care from prehospital treatment to the Emergency Department or through hospitalization. The Ambulance Run Report is a legal document and becomes a part of the patient's medical record. It is important that each section of the report be completed. Some of the data elements on the form require consensus among the EMT's in the responding service as local operations may vary.

Variations may also be required by service medical direction and should be incorporated uniformly by the service. "N/A" (Not Applicable) checkboxes in the form should only be used when the information requested is not applicable to the run. "Other" is provided to give additional options beyond what is listed. It should be filled in with details when it is checked.

Run Report data element definitions can be found on the Bureau of Emergency Medical Services & Injury Prevention web site [http://www.dhfs.state.wi.us/DPH\\_EMSIP/index.htm](http://www.dhfs.state.wi.us/DPH_EMSIP/index.htm) or hard copy may be obtained by calling (608) 266-1568.

**RESPONSE**

This section of the run report solicits service and crew identification information as well as response information. Services need to uniformly determine how they are going to document Patient Care Record number and Time Patient Detected. The latter may be interpreted differently based on local differences in notification to the EMS system.

**DEMOGRAPHICS**

This section solicits all of the patient's personally identifying information including work and insurance information. Note that the Social Security number is solicited here. It should be explained to the responsive patient that this is optional information and how this optional information will be used, i.e. billing purposes. Services cannot be denied if the patient does not provide personally identifying information.

**HISTORY**

In addition to patient signs and symptoms this section solicits information about the patient that may be useful in responding to the call and in the transition of care.

**ASSESSMENT**

This section solicits patient vitals and patient's condition. Notations here used in conjunction with information from other sections provide the basis for patient treatment.

**CPR / DEFIBRILLATION**

This section solicits documentation on who provided CPR and defibrillation and at what time.

**PHYSICAL EXAMINATION**

This section provides a matrix for identifying type and location of trauma, injury and pain. Note that pain means pain without trauma. This section also contains a place to record patient's status on the Glasgow Coma Scale.

**TRAUMATIC INJURY and CRASH DATA**

This section solicits cause of injury, any vehicle crash information, and safety equipment in use by the patient at the time of injury.

**IMPRESSION / TREATMENT / COMMENT**

This section solicits the provider impression of the patient and treatment performed on the patient. It contains a comment section to record any additional information. It references DPH 7300, a third page, for recording additional treatment, skills and comments.

**MISCELLANEOUS**

This section solicits incident disposition information, other public service agencies on the scene and a variety of other information that is important to an emergency response. A signature block ends DPH 7119 and must be signed by the EMT completing the run report.

**DPH 7300**

Form DPH 7300 is an extension of DPH 7119 and is only used in conjunction with DPH 7119. It is to be used to report anything beyond a basic run and for a call that requires additional comments and treatment documentation. It can be used by any EMS service level. It serves as a treatment log with timed continual patient assessment and treatment.

**ORDERING INFORMATION:**

DPH 7119 and DPH 7300 can be ordered through Document Sales by submitting a written request on service letterhead to:

Wisconsin Department of Administration  
Bureau of Document Sales & Distribution Section  
202 S Thornton Ave  
Box 7840  
Madison, WI 53707-7840

DPH 7119 (pages 1 & 2) is sold in quantities of 250 per order. DPH 7300 (skills/extended comments) is sold in quantities of 100 per order.

Orders must be prepaid. Pricing information can be found at website [http://www.dhfs.state.wi.us/DPH\\_EMSIP/index.htm](http://www.dhfs.state.wi.us/DPH_EMSIP/index.htm) or obtained by calling the Bureau of Emergency Medical Services & Injury Prevention at (608) 266-1568.